

Work Order ID 102405

102405

Page 1

May-28-13 8:50:38 AM

Item ID: D3904-1

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Washer

Stop

NS2

Start Date: 5/23/13

Start Qty: 40.00

40

Cust Item ID:

Required Date: 5/27/13

Req'd Qty: 40.00

40

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 13-05-29 Tooling:

Date:

Run

Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D3904	B
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100

100

Purchasing

Memo

0.00

MLJ 40 5/29

Purchasing

ISSUE P/O: PO 200024

POSSIBLE SUPPLIER: SPAENAUER
Möller Ind.

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

13/6/10 100

120

QC6- Inspect dimensions to drawing

0.00

120

QC

Quality Control

Memo

0.00

DAS
13 6 11

100

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ **Date:** _____

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			
Part No. _____											
NCR No. _____											
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data	<input type="checkbox"/>										
Equip/Tooling	<input type="checkbox"/>										
Operator	<input type="checkbox"/>										
Material	<input type="checkbox"/>										
Setup	<input type="checkbox"/>										
Other	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										
FAULT CATEGORY											
Landing Gear				General							
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced			
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure			
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld			
Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled			
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>				
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>				
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>	Other	<input type="checkbox"/>				
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>				

Work Order ID 102405

102405

Page 2

May-28-13 8:50:38 AM

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N900040100

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Cust Item ID:

Required Date: 5/27/13

Req'd Qty: 40.00

40

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

Identify as per dwg & Stock Location: STO69

0.00

130

Packaging

Packaging

Memo

0.00

100 X 7/13/13-06-11

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Quality Control

Memo

0.00

ML5 13-06-12
ML5 13-06-12

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS														
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Part No. _____			Work Order Update <input type="checkbox"/>																	
NCR No. _____																				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description			Sign & Date	Verification		QC Inspector						
Doc/Data																				
Equip/Tooling																				
Operator																				
Material																				
Setup																				
Other																				
Process																				
Supplier																				
Training																				
Unapproved																				
FAULT CATEGORY																				
Landing Gear				General																
Bending Centre Not Concentric to O/S Cracks Crushed/Crimped Cuffs Heat Treat Inspection Strip in Tube Ripples in Bend Torque Waves in Extrusion Turning Sequence Wave/Twist in Tube				Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions												
								<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge												
								<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled												
								<input type="checkbox"/> Other												

Picklist Print

May-28-13 8:50:38 AM

Page 1 /

Work Order ID: 102405

Parent Item: D3904-1

Parent Item Name: Washer

Start Date: 5/23/13

Required Date: 5/27/13

Start Qty: 40.00

Required Qty: 40.00

Comments: IPP RevA: New issue DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
658-065 Washer		Purchased	No				Each	0.0000		-40		5/23/13	Open

NCR: Yes / No

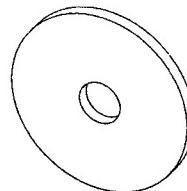
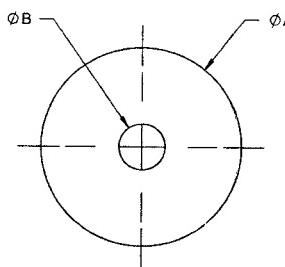
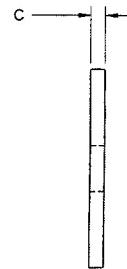
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ **Date:** _____

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			
Part No. _____		NCR No. _____									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending				Bend <input type="checkbox"/>	Grain <input type="checkbox"/>			Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>		
Centre Not Concentric to O/S				BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>			Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>		
Cracks				Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>			Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>		
Crushed/Crimped				Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>			Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>		
Cuffs				Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>			Part Moved <input type="checkbox"/>			
Heat Treat				Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>			Positioned Wrong <input type="checkbox"/>			
Inspection Strip in Tube				Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>			Power Loss/Surge <input type="checkbox"/>			
Ripples in Bend				Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>						
Torque Waves in Extrusion				Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
Turning Sequence				Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						
Wave/Twist in Tube				Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>						
Other <input type="checkbox"/>											

SPECIFICATION CONTROL DRAWING



B

DART P/N	A	B	C	BOLT SIZE	MATERIAL	SUPPLIER	SUPPLIER P/N
D3904-1	0.875	0.203	0.063	#10	18-8 STAINLESS STEEL	SPAENAU	658-065

- NOTES:**
- 1) MATERIAL: SEE TABLE
 - 2) FINISH: NONE
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 - 6) IDENTIFICATION: NONE
 - 7) WEIGHT: 0.01 lbs

SHEET NO. 1
 ALTE R 1.0
 ENGR 1.0
UNCONTROLLED COPY
 SUBJECT TO CHANGE
 WITHOUT NOTICE
 WORK ORDER
 NO 102405-MJ5
 13-05-29

RELEASED
06/15/09

B	ADD TABLE ZN B7-1		RF	09.06.30
A	NEW ISSUE		RF	09.03.04
REV.	DESCRIPTION		BY	DATE
DESIGN	RF	DART AEROSPACE USA, INC. PORT HADLOCK, WA		
DRAWN	RF			
CHECKED	<i>PA</i>	DRAWING NO.		REV. B
MFG. APPR.	<i>PA</i>	D3904		SHEET 1 OF 1
APPROVED	<i>PA</i>	TITLE	SCALE	
DE APPR.	<i>PA</i>	WASHER	NTS	
DATE	09.06.30			

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Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO20024

Purchase Order Date 5/29/2013

PO Print Date 6/3/2013

Page Number 1 of 2

Order From : VC-MA1001

MAIN INDUSTRIAL SALES LTD.
1475, TESSIER
HAWKESBURY, ON K6A 3S6
CA

Contact Name	Buyer	Chantal Lavoie
Vendor Phone	Requisition Nbr	
Vendor Fax	Tax Resale Nbr	10127-2607
Vendor Account Nbr	Terms	Net 30
	Currency	CAD
	FOB	Destination-Collect

REvised

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	658-065	Washer	6/5/2013 Yes	100.00 Each	Dart Truck	\$0.2930	\$29.30
2	R3100-75	Retaining Ring	6/5/2013 Yes	8.00 Each	Dart Truck	\$0.2532	\$2.03
3	6800ZZ	Bearing	6/5/2013 Yes	100.00 Each	Dart Truck	\$1.4800	\$148.00
		Special Inst:	MANUFACTURE AS PER DRAWING D3904 REV B BATCH 102405				
		Special Inst:	MANUFACTURE AS PER DRAWING D4057 REV A BATCH 102453				
		MAIN INDUSTRIAL P/N 0-5100075					
		Special Inst..	MANUFACTURE AS PER DRAWING D3183 REVC1 BATCH 102531				

CL No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required YES NO

MAIN INDUSTRIAL SALES LTD.

1475 TESSIER ST.
HAWKESBURY ON K6A 3S6
Phone: (613) 632-3595 Ext. Fax: (613) 632-0262
sales@mainindustrialsales.com

Packing Slip

DATE June 07, 2013
NUMBER 0000163145
CUSTOMER NO. DART

BILL TO:

DART AEROSPACE LTD.
1270 ABERDEEN ST.
HAWKESBURY ON K6A 1K7

SHIP TO:

DART AEROSPACE LTD.
1270 ABERDEEN ST.
HAWKESBURY ON K6A 1K7

(613) 632-5200 Ext.

(613) 632-5200 Ext.

P.O. NUMBER	SALESPERSON	ORDER DATE	REQ. DATE	ORDER NUMBER
20024	EB	03-Jun-13		0000163145
F.O.B.	SHIP VIA	TERMS		
F.O.B. value	OUR TRUCK / LOCAL	NET 30 DAYS		
PART NUMBER	LOCATION	UOM	REQ.	SHIPPED
0-658065 .203 x .875 x .040-.075 FLAT WASHER ZINC		EA	100	100
YOUR PART #: 658-065				